

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN** #3 PW  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF <b>Lisa A. Biron</b>	COURT CASE NUMBER <b>4:15-CV-205-0</b>
DEFENDANT <b>Lauren Cimperman, Psy. D. (Lauren Carter)</b>	TYPE OF PROCESS <b>Civil</b>

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
**Dr. Lauren Cimperman Carter**  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
**7 Waterwood Ct., Mansfield, Texas 76063**

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW <b>Lisa A. Biron</b> <b>Reg. # 12775-049</b> <b>Federal Correctional Institution</b> <b>P.O. Box 1731</b> <b>Waseca, MN 56093</b>	Number of process to be served with this Form 285 <b>1</b>
	Number of parties to be served in this case <b>5-7</b>
	Check for service on U.S.A. <b>N</b>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Upon information and belief, Dr. Cimperman was married in July 2016 and is now Lauren Carter. This address appears to be current as of June 2018.

Signature of Attorney other Originator requesting service on behalf of: <b>Lisa Biron</b>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER <b>(507) 835-8972</b>	DATE <b>11/5/2018</b>
--	---	---	--------------------------

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <b>7</b>	District of Origin No. <b>A77</b>	District to Serve No. <b>A77</b>	Signature of Authorized USMS Deputy or Clerk <b>[Signature]</b>	Date <b>11-16-18</b>
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input checked="" type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.					
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)					
Name and title of individual served (if not shown above)					
<input checked="" type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode					
Date <b>11/24/18</b>					
Time <b>9:15</b> <input checked="" type="checkbox"/> am <input type="checkbox"/> pm					
Signature of U.S. Marshal or Deputy <b>[Signature]</b>					

Service Fee <b>\$130.00</b>	Total Mileage Charges including endeavors <b>\$29.96</b>	Forwarding Fee <b>-</b>	Total Charges <b>\$159.96</b>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) <b>IFP</b>
--------------------------------	---	----------------------------	----------------------------------	------------------	---

REMARKS: **Served to Spouse (Nathan Carter) BOP office at FMC FTW Prison**

**PRINT 5 COPIES:**

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

AO 440 (Rev. 12/09) Summons in a Civil Action (Page 2)

Civil Action No. 4:15-cv-00205-O

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) Lauren Carter  
 was received by me on (date) 11/21/18.

☐ I personally served the summons on the individual at (place) \_\_\_\_\_  
 on (date) \_\_\_\_\_; or

☒ I left the summons at the individual's residence or usual place of abode with (name) Nathan  
Carter (Spouse), a person of suitable age and discretion who resides there,  
 on (date) \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) \_\_\_\_\_, who is designated  
 by law to accept service of process on behalf of (name of organization) \_\_\_\_\_  
 on (date) \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☐ other (specify) \_\_\_\_\_

My fees are \$ 130.00 for travel and \$ 29.94 for services, for a total of \$ 159.94

I declare under penalty of perjury that this information is true.

Date: 11/26/18

[Signature]  
 Server's signature

DWAY Daryl Winkard  
 Printed name and title

501 W 10th Ftw, TX  
 Server's address

76102

Additional information regarding attempted service, etc: